EVALUATOR (Name and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS: MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
DEGLADATION OF COURT CONNECTED OUR DIGUTORY	
DECLARATION OF COURT-CONNECTED CHILD CUSTODY EVALUATOR REGARDING QUALIFICATIONS	
1. I, (name): , declare that if I a	ppeared in court and were sworn, I would testify
to the truth of the facts in this declaration.	
2. As of (date): , I am a court-conne	ected child custody evaluator for the above court.
3. I have satisfied all of the domestic violence training requirements for a court-connected child custody evaluator set forth in Family Code sections 1816 and 3110.5 and rule 5.230 of the California Rules of Court; and	
4. a. I have satisfied all of the education, training, and experience requirements set forth in rule 5.225(d)–(f) of the California Rules of Court; or	s for a court-connected child custody evaluator
b. I have not satisfied all of the education, training, and experience requirem evaluator set forth in rule 5.225(d)–(f) of the California Rules of Court, but because:	-
(1) I have completed at least 20 of the 40 hours of initial education and tra	aining required by rule 5.225(d);
(2) I will complete the additional 20 hours of education and training requir the date I began practice as a court-connected child custody evaluato	-
(3) I am in compliance with rule 5.225(f) of the California Rules of Court;	
(4) I am being supervised by a court-connected child custody evaluator who has complied with all of the applicable	
education, training, and experience requirements for court-connected	child custody evaluators.
I declare under penalty of perjury under the laws of the State of California that the fore	going is true and correct.
Date:	
Date.	
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(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)